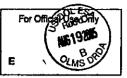
U.S. Department of Labor Office of Labor-Management Washington DC 20210

FORM LM-30 **LABOR ORGANIZATION OFFICER-AND EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11-30-2006

This report is mandatory under P L. 86-257 as amended Failure to comptly may result in criminal prosecution, fines or civil penalties as provided by 29 U S.C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 10/17	2 Fiscal Year Covered From	
	1 / 1 / 2004 Through 12 / 31 / 2004	
3 Name and address of person filing	4 Name file number and address of labor organization	
Name Jeffrey A Passante	Name New York City District Council of Carpenters	
	Labor Organization File Number 032-922	
PO Box Bldg Room No if any Sth Floor	PO Box Building and Room Number if any	
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Street 395_Hudson_Street	Street 395 Hudson Street	
City New York	City New York	
State New York ZIP Code + 4 10014-3669	State New York ZIP Code + 4 10014-3669	
5 Position in labor organization		
Business Representitive Dele	gate	
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of		
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organizati		
6 Name and address of Employer (including trade name if any)	7.a Nature of Interest, Transaction or Income	
Name Greater NY Floorcovers Industry Promo Fund	01/08/2004-Joint Trade Board Meeting and Lunch	
Trade Name If any		
PO Box Bldg Room No Ifany		
TO GOX GAO TOOTH WITH THE TOTAL THE	7 b Amount	
Street 500 North Broadway		
City Jerico	\$95	
State New York ZIP Code + 4 11753-2127	\	
Sign	Signature	
15 Signature and verification. The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions)		
111 VA		
Signed ///www Tasson	On 08/10/2005 212-929-2940	
1, , ,	Telephone Number	
Form LM-30 (2003)	Page 1 of A	

Nam of Person Filing Jeffrey-Passante	File Number U
Part A Continuation Page	
A Held an interest in engaged in transactions (including loans) with or derived in employees your organization represents or is actively seeking to represent	ncome or other economic benefit of monetary value from an employer whose
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income
Name Greater N Y Ploorcovers Industry Promo Fund	03/16/2004 Jurisdictional meeting and lunch with Empire State Council of Carpenters and Greater New York Ploorcovers Association
Trade Name if any	
PO Box Bidg Room No If any	
Street 500 North Broadway	7 b Amount
	\$75
City Jerico	
State New York ZiP Code + 4 11753-2127	
A. Held an interest in engaged in transactions (including loans) with or derived	ncome or other economic benefit of monetary value from an employer whose
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Form LM-30 (2003)

City

State

PO Box Bidg Room No if any

Street 500 North Broadway

Jerico

New York

Add New Part A

ZIP Code + 4 11753 2127

7 b Amount.

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